Form **8937**(December 2017) Department of the Treasury Internal Revenue Service

Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

| P | art I Reporting | lssuer | | | | | | | | | |
|----|---|-------------------------------------|-----------|---------------------------------|--|-----------------------|--|--|--|--|--|
| 1 | Issuer's name | | | | 2 Issuer's employer identificat | ion number (EIN) | | | | | |
| | Signature Canadia | n Bond Corpora | te Class | (EFT5) | N/A | | | | | | |
| 3 | Name of contact for add | ditional information | 4 Telep | phone No. of contact | 5 Email address of contact | | | | | | |
| | Duarte Boucinha | | 4 | 416-681-1752 | dboucinha@ci.com | | | | | | |
| 6 | Number and street (or F | P.O. box if mail is not | delivered | d to street address) of contact | 7 City, town, or post office, state, and | d ZIP code of contact | | | | | |
| | 2 Queen Street Ea | ast, 20th Floor | | | Toronto, Ontario, M50 | C 3 G 7 | | | | | |
| 8 | Date of action | | 9 (| Classification and description | | | | | | | |
| | Tax Year 2019 | | | Non-taxable | distribution | | | | | | |
| 10 | CUSIP number | 11 Serial number | s) | 12 Ticker symbol | 13 Account number(s) | | | | | | |
| | N/A | N/A | | N/A | N/A | | | | | | |
| Р | art II Organizatio | onal Action Attac | ch additi | onal statements if needed. S | ee back of form for additional question | ns. | | | | | |
| 14 | Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for | | | | | | | | | | |
| | the action ► | | | | holders throughout the 2019 taxation | | | | | | |
| | | | | * | ne return of capital that occurred th | <u>roughout</u> | | | | | |
| | | the 2019 taxable year. | | | | | | | | | |
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| 15 | Describe the quantitate share or as a percentage | | | | rity in the hands of a U.S. taxpayer as an a | djustment per | | | | | |
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| 16 | Describe the calculation valuation dates ▶ | on of the change in ${ m N}/{ m A}$ | pasis and | the data that supports the calc | llation, such as the market values of securi | ties and the | | | | | |
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| Part | Ш (| Organizational Action (conti | nued) | | | |
|---------------|--------------|--|---|----------------------------|----------------|---|
| 1 7 Li | ist the | applicable Internal Revenue Code s | ection(s) and subsection(s) upon wh | ich the tax treatment | is based ► | IRC section 301(c)(2), 312 and 316 |
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| С | an any | resulting loss be recognized? ► _ | N/A | | | |
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| Р | rovide | any other information necessary to | implement the adjustment, such as | the reportable tax yea | ır ▶ | N/A |
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| | | | ve examined this return, including accom | | | |
| an | beliet | , it is true, correct, and complete. Declara | ation of preparer (other than officer) is bas | ed on all information of v | wnicn preparer | nas any knowledge. |
| gn ere | Signa | tura • | | Date ► | Mar 31, | 2019 |
| | Signa | | | Date | | |
| | Print | your name ► Darie Urbanky | <u> </u> | Title► | Presiden | t and Chief Operating Off |
| | 1 11116 | <u>-</u> - | | | | |
| | | Print/Type preparer's name | Preparer's signature | Date | | heck if PTIN |
| | arer Only | Print/Type preparer's name Firm's name ▶ | Preparer's signature | Date | Se | heck ☐ if PTIN llf-employed rm's EIN ▶ |